MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

"10° 527 669

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 AMENDMENT		AFTER		LAIMS		AS FILED		AFTER 1°AMENDMENT		AFTER	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	L		IND.	DEP.	IND.	DEP.	IND.	DEP.
1						ļ		51					- 1.21	DET.
3		-		4			-	52						
4	-	-					-	53						
5	····	7				 	-	54 55						
6				/			l -	56						
7	•							57						
8								58						
9								59						
. 10								60						
11	•							61	<u> </u>					
12 13							-	62						
14							-	63						
15						 	-	64 - 65						
16						 		66						
17								67						
18								68						
19								69						
20				-				70						
21								71						
22						<u> </u>	-	72						
23 24						 	l .	73						
25			· · ·				-	74				_ · · ·		
26						-		75 76						
27						 	l F	77						
28					·		l t	78						
29								79 .						
30							l [80						
31						<u> </u>	-	81						
32						·	-	82						
33 34							!	83						
35	-	-					7	84 85				-		
36	••••			· .			-	86		\				
37							i t	87						
38				-			t t	88						
39								89	5				1 - 8	1
40								90						
41		ļ				<u> </u>	!	91						
42	<u> </u>		 	 		1	{	92						
43		 					}	93 94						
45							1 F	95			<u> </u>			
46						1	1 t	96					<u>-</u>	
47							j f	97						
48] [98						
49	·							99						
50	<u> </u>		<u> </u>		}		}	100						
TOTAL IND.	2	4	2	1] 💠	 -	OTAL END.		4		4		1
TOTAL DEP	2	63	3	♦ □		*	ן נ	OTAL DEP.		42		(a		♦ ■
TOTAL CLAIMS	5	2000	5				1 1	TOTAL CLADES						
-PTO - 1360	ABEN TIME				1	1	a L		L		TMENT of C	OMMERCE	L	